RESOLUTION NO. 2001-16

A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA AMENDING THE FISCAL YEAR 2001 GENERAL REVENUE AND EXPENDITURE BUDGETS TO RECEIVE UNANTICIPATED REVENUE AND AUTHORIZE ITS EXPENDITURE BY THE ST. JOHNS COUNTY EMS PROGRAM.

WHEREAS, St. Johns County has an Emergency Medical Service (EMS) which operates under its General Fund; and

WHEREAS, there has historically been an annual grant of funds to the County by the State of Florida for the purpose of enhancing the provisions of EMS; and

WHEREAS, certain State of Florida Grant funds are proprietary, do not expire as of the end of the fiscal year and may be carried over from a previous year.

NOW, THEREFORE BE IT RESOLVED by the Board of County Commissioners of St. Johns County that:

1. The above “Whereas” statements are adopted as a finding of fact.

2. The General Fund revenue budget shall be adjusted to account for unanticipated revenue in the amount of $11,079 from the roll-over of fiscal year 2000 EMS grant funds and EMS expenditure budget shall be increased by $11,079

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, State of Florida, this 23rd day of January 2001.

BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA

By: Mary F. Kohnke, Chair

ATTEST: Cheryl Strickland, Clerk

By: Patricia Belcher
Deputy Clerk
Department of Health  
EMS County Grant Program Change Request  

St. Johns County EMS  
Name of Grantee  
2000 - 2001  
Grant No.  

<table>
<thead>
<tr>
<th>BUDGET LINE ITEM</th>
<th>CHANGE FROM</th>
<th>CHANGE TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000 - 2001 GRANT 1999 - 2000 Rollover</td>
<td>38,659.93</td>
<td>49,739.73</td>
</tr>
<tr>
<td></td>
<td>11,079.80</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>$38,659.93</td>
<td>$49,739.73</td>
</tr>
</tbody>
</table>

Justification for Budget or Activity Change: use an additional page if needed.

1999-2000 Grant Expenditures $11,079.80 less than Grant Total (w/99-99 Rollover + Interest Earned). It is requested that this balance be rolled over into the 2000-2001 Grant.

This change shall begin and take effect on: 11/12/00  
Month Day Year  

Mary Jane N. Stevens  
Signature of Grantee’s Authorized Person  

11-7-00  
Date  

For use only by Department of Health  
Bureau of Emergency Medical Services  

Approval Yes □ No □  
Change No:  

David V. Jacobson  
Signature of State Authority or EMS Grant Manager  

12-16-00  
Date